

## LETTER OF AUTHORIZATION

**TO WHOM IT MAY CONCERN:** This is to notify you that until further written notice, we have selected Voxbone., as our primary telecommunications provided for Local Services. Please release these numbers for Local Portability.

**Current provider details** (all fields are **mandatory**):

- Name of current provider:
- Address:
- City:
- State:
- Post code:
- Tel:

**Customer details** (all fields are **mandatory**):

- Name of customer:
- Address:
- City:
- State:
- Post code:
- CVP:
- Tel:

This authorization applies to the following numbers:  
(9 Digits)

I am also authorizing Voxbone to obtain copies of our current customer service records.

I declare that I am the duly authorized representative of the following company and I have the authority to sign on behalf of the company that is requesting this number portability.

Should you have questions or concerns, please contact me at the number listed below. Thank you for your prompt attention to this matter.

\_\_\_\_\_ Authorized Representative (Signature)\*

\_\_\_\_\_ Authorized Representative (Hand written name)\*

\_\_\_\_\_ Date\*

\_\_\_\_\_ Place\*

\_\_\_\_\_ Company Name\*

\_\_\_\_\_ Company Telephone Number\*

**\*Mandatory**

**\*\*\* A proof of ID has to be provided together with the LOA and the most recent invoice\*\*\***

The following proof of ID will be accepted:

- NIF (VAT for companies)
- BI (Former ID card number)
- Passaporte (Passport)
- Título de residencia (Residence permit)
- Cartão de Cidadão (New ID card number)